

PART B - FEE(S) TRANSMITTAL

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25908 7590 09/07/2005

NOVOZYMES NORTH AMERICA, INC.
500 FIFTH AVENUE
SUITE 1600
NEW YORK, NY 10110

12/06/2005 SFELEKE2 00000030 501701 10625115

01 FC:1501 1400.00 DA
02 FC:1504 300.00 DA
03 FC:800 APPLICATION NO.3.00 DA

FILING DATE

FIRST NAMED INVENTOR

ATTORNEY DOCKET NO.

CONFIRMATION NO.

10/625,115

07/22/2003

Bjarne Ronfeldt Nielsen

5279.220-US

9394

TITLE OF INVENTION: THERMOSTABLE GLUCOAMYLASE

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

<i>Jason Garbell</i>	(Depositor's name)
<i>Björn Ronfeldt Nielsen</i>	(Signature)
<i>December 2, 2005</i>	(Date)

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	12/07/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
PROUTY, REBECCA E	1652	536-023200

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Novozymes A/S

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Bagsvaerd Denmark

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

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 Publication Fee (No small entity discount permitted)
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Jason Garbell

Date

12-2-05

Typed or printed name

Jason Garbell

Registration No.

44,116

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